

**NEW YORK WING, CIVIL AIR PATROL  
APPLICATION FOR CAP OPERATOR'S PERMIT**

Name (Last, First, MI)

E-mail

Unit Charter

Group

**PLACE COPY OF  
STATE DRIVERS LICENSE  
HERE**

**PLACE COPY OF  
CIVIL AIR PATROL'S ID CARD  
HERE**

☐

Enclosed is my Driver's license abstract.

I am familiar with Civil Air Patrol's regulations and Northeast Region's and New York Wing's supplements concerning the use of Civil Air Patrol's corporate vehicles.

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

Action Number

Unit Commander

Date

Action Number

Group Commander

Date

**TO BE USE BY WING HQ. ONLY**

Date Received

Date Processed

Date Mailed

☐

Approved

☐

Denied

☐

Restricted

☐

Temporary

☐

Other

Comments

\_\_\_\_\_  
Wing Transportation Officer

\_\_\_\_\_  
Date